

## CLAIMS ONLY

Application Number

10/649,777

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	I					
2	I					
3	I					
4	I					
5	I					
6	I					
7	I					
8	I					
9	I					
10	I					
11	I					
12	I					
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48						
49						
50						
Total Indep	15					
Total Depend	13					
Total Claims	14					

*	Indep	Depend	*	Indep	Depend	*
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Total Indep						
Total Depend						
Total Claims						